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SCHEDULE B (FEC Form 3) Lise separate schedule(s) FOR					LINE NUMBER: PAGE 313 / 332	
ITEMIZED DISBURSEMENTS		Use separate sched for each category of		1	k only one)	
	OD ON OE MIE IVIO	Detailed Summary	Page	√ 17	☐ 18 ☐ 19a ☐ 19b ☐ 20a ☐ 20b	
Any information con	aind from such Bonote and Chatener			20c	21	
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)						
Sittenfeld for Senat	de .					
Full Name (Last,	First, Middle Initial)					
Susan Sachs Goldman					Date of Disbursement	
Mailing Address						
-	setts Ave NW Apt 7	02 05 2015				
City State Zip Code					Amount of Disbursement this Period	
Washington	D				Attourt of Disbursement this Period	
Purpose of Disbu	ursement				200.00	
Candidate Name			<u> </u>	L. R. Barrelle, and	Transaction ID: VPF84CNA1M2I	
			Cate:	gory/		
Office Sought:	House Disbursem	ent For: 2016	туре	· 	-	
ŭ	☐ Senate ☑ Pı	imary General			* In-Kind Received	
o		her (specify)				
State:	District:					
P.G. Sittenfeld	First, Middle Initial)				B.4. (B.4	
					Date of Disbursement	
Mailing Address					03 08 2015	
100 E Central Pk	<u> </u>					
City Cincinnati	Str Ot				Amount of Disbursement this Period	
Purpose of Disbursement				443.20		
Travel						
Candidate Name			Categ	gory/	Transaction ID: VPF84CP8AQ2I	
05.0	<u></u>		Туре			
Office Sought:	☐ House Disburseme	<u></u>			* In-Kind Received	
		mary General her (specify)			THAT I VECEIVED	
State:	District:					
Full Name (Last, First, Middle Initial)						
Jos Berning Printi	ing				Date of Disbursement	
Mailing Address					01 23 2015	
1850 Dalton Ave					01 23 2015	
City	Sta				Amount of Disbursement this Period	
Cincinnati	OF	45214-2056				
Purpose of Disbursement Printing				555.10		
Candidate Name Category/				Transaction ID: VPE8W9KND33		
			Туре	jory/		
Office Sought:		nt For: 2016				
	☐ Senate ☐ Pri	• —				
State:	District:	ner (specify)				
SUBTOTAL of Receipts This Page (optional)					1198.30	
FOTAL This Period (last page this line number only)					1150.30	
	ast page this line number only)					
EANIOAD						